| •   |                |                                 |                   |                       |              |                  |                  | Application or Docket Number |                        |           |                     |                        |
|---|----------------|---------------------------------|-------------------|-----------------------|--------------|------------------|------------------|------------------------------|------------------------|-----------|---------------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECORD   |                |                                 |                   |                       |              |                  |                  | 10645731                     |                        |           |                     |                        |
| Effective January 1, 2003 7117970503  |                |                                 |                   |                       |              |                  |                  |                              |                        |           |                     | 13                     |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |                |                                 |                   |                       |              |                  |                  | LL E                         | NTITY                  | OR        | OTHER<br>SMALL      |                        |
| TOTAL CLAIMS  |                | 31                              |                   |                       |              | R                | RATE FEE         |                              | 1                      | RATE      | FEE                 |                        |
| FOR   |                | NUMBER FILED                    |                   | NUMBER EXTRA          |              | BAS              | BASIC FEE 375.00 |                              | OR                     | BASIC FEE | 750.00              |                        |
| TOTAL CHARGEABLE CLAIMS   |                | 55 minus 20=                    |                   | • 35                  |              | X                | X\$ 9=           |                              | OR                     | X\$18=    |                     |                        |
| INDEPENDENT CLAIMS  |                | 6 minus 3 =                     |                   | 3                     |              | ×                | X42=             |                              | OR                     | X84=      |                     |                        |
| MULTIPLE DEPENDENT CLAIM P  |                |                                 | RESENT            |                       |              |                  | 11               | +140=                        |                        | ОЯ        | +280=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |                |                                 |                   |                       |              |                  |                  | TOTAL                        |                        | OR        | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II   |                |                                 |                   |                       |              |                  |                  |                              | -                      | •         | OTHER               |                        |
| CLAIMS  |                |                                 | (Colum            |                       |              | (Column 3)       | m 3) SMA         |                              | ENTITY                 | OR        | SMALL               |                        |
| AMENDMENT A   |                | REMAINING<br>AFTER<br>AMENDMENT |                   | NUM<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA | R/               | TE                           | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |
| NON   | tal            | • 53                            | Minus             | • 5                   | 3            | 8                | X                | 9=                           |                        | OR        | X\$18=              |                        |
| AME   | dependent      | •                               | Minus             |                       | /<br>        | -                | X                | 2=                           |                        | OR        | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                |                                 |                   |                       |              |                  | +1               | 40=                          |                        | OR        | +280=               |                        |
|   |                |                                 |                   |                       |              |                  |                  | OTAL                         |                        |           | TOTAL               |                        |
| 8.9.05 (Column 1) (Column 2) (Column 3)   |                |                                 |                   |                       |              |                  |                  |                              |                        |           | ADDIT. FEE          |                        |
|   |                | CLAIMS<br>REMAINING             |                   | HIGH                  | EST          | 4.7              |                  |                              | ADDI-                  | 1         |                     | ADDI-                  |
| ENT   |                | AFTER<br>AMENDMENT              |                   | PREVIO                | DUSLY        | PRESENT<br>EXTRA | R2               | RE                           | TIONAL<br>FEE          |           | PATE                | TIONAL<br>FEE          |
| AMENDMENT B   | otal           | .48                             | Minus             | ** 5                  | 55           |                  | X                | 8=                           |                        | OR        | X\$18=              |                        |
| AME   | dependent      | * S                             | Minus             | PENDENT               | 6            |                  | X4               | 2=                           |                        | OR        | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                |                                 |                   |                       |              |                  |                  | 10=                          |                        | <b>OR</b> | +280=               |                        |
| TOTAL   |                |                                 |                   |                       |              |                  |                  |                              |                        | OR        | TOTAL<br>ADDIT: FEE |                        |
| (Column 1) (Column 2) (Column 3)  |                |                                 |                   |                       |              |                  |                  |                              |                        |           | ADAN FEE            |                        |
| 0   |                | CLAIMS<br>REMAINING             |                   | HIGH                  | EST          |                  |                  | -                            | ADDI-                  |           |                     | ADDI-                  |
| E   |                | AFTER                           |                   | PREVIO                | USLY         | PRESENT<br>EXTRA | RA               | TE                           | TIONAL                 |           | RATE                | TIONAL                 |
| ¥ 1   | otel           | AMENDMENT                       | Minus             | PAID                  | НОН          | e                |                  |                              | FEE                    |           |                     | FEE                    |
| 13 H  | dependent      | •                               | Minus             | ***                   |              | =                | XS               | 9=                           |                        | OR        | X\$18=              |                        |
| ₹ F   |                |                                 | ULTIPLE DEPENDENT |                       |              |                  | X42=             |                              |                        | OR        | X84=                |                        |
|   |                |                                 |                   | -12-01                | - 100        |                  | +14              | IO=                          |                        | OR        | +280=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "U" in column 3.  **If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20."  **ADDIT. FEE OR ADDIT. FEE |                |                                 |                   |                       |              |                  |                  |                              |                        |           |                     |                        |
|   | he "Highest Nu | mber Previously Pa              | ad For IN TH      | IS SPACE I            | s loss the   | a 3, enter "3."  | AUUII            |                              | orooriste bo           | ,         |                     |                        |
|   |                |                                 |                   |                       | ,            |                  |                  |                              |                        |           |                     |                        |